



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 135400002

CITY OR TOWN WENHAM

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: JOHN KEOHANE

DOING BUSINESS AS WENHAM TEA HOUSE

ADDRESS 4 MONUMENT ST

CITY/TOWN: WENHAM

STATE: MA

ZIP CODE: 01984

MANAGER: KEOHANE,JOHN

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

7406 SF OF PREMISE INCLUDES A DINING ROOM SEATING AREA OF 644, 1050 SF KITCHEN, PATIO, BAKERY, STORAGE IN BASEMENT. FIVE DOORS. MAIN ENTRANCE IN FRONT, DOOR IN RETAIL AREA THAT SERVES AS ENTRANCE AND EXIT. REMAINING DOORS ARE IN KITCHEN, DINING AREA AND BASEMENT, ALL SERVE AS EMERGENCY EXITS

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 135400003

CITY OR TOWN WENHAM

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2015

CLASS

YEAR

LICENSEE NAME: ALBERT ABDELMALAK

DOING BUSINESS AS RICHDALE

ADDRESS 143 TOPSFIELD

CITY/TOWN: WENHAM

STATE: MA

ZIP CODE: 01984

MANAGER: ABDELMALAK,
ALBERT

TYPE OF LICENSE: Package Store

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

YOUR EMAIL ADDRESS IS REQUIRED. PLEASE PRINT CLEARLY.

DESCRIPTION OF LICENSED PREMISES:

SINGLE STORY BRICK BUILDING WITH A SINGLE STORY BUILDING WITH A SINGLE ENTRANCE IN
THE FRONT CENTER AND SINGLE EXIT IN THE REAR

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE: